(d) if so, when and if not, the rea-reasons therefor?

THE MINISTER FOR HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) and (b) Yes, Sir.

(c) and (d) The Government habe introduced the Transplantation of Human Organs Bill, 1993, which has been passed by the Rajya Sabha on 5.5.1993. The Bill provides for removal of organs from accident victims only if they satisfy the conditions laid down for the same in the legislation.

दिल्ली में इलेक्ट्रोपैथी चिकित्सा पद्धति पर प्रतिबन्ध लगाया जाना

288. **श्री जगन्नाथ सिंह** : क्या स्वास्थ्य और परिवार कल्याण मंत्री यह बताने की कृपा करेंगे कि :

(क) क्या यह सच है कि भारत सरकार ने निदेशक, स्वास्थ्य सेवा, दिल्ली प्रशासन को यह आदेश जारी किए थे कि वह दिल्ली में चल रहे इलेक्ट्रोपैथी मेडिकल कालेजों को तत्काल बन्द करें और इलेक्ट्रोपैथी चिकित्सा पद्धति के चिकित्सकों पर प्रतिबन्ध लगायें; और

(ख) क्या दिल्ली प्रशासन ने इलेक्ट्रोपैथी चिकित्सा पद्धति के प्रयोग पर प्रतिबन्ध लगाने के संबंध में एक विज्ञप्ति जारी की है और क्या यह इस चिकित्सा पद्धति का प्रयोग उचित है ?

स्वास्थ्य और परिवार कल्याण मंत्री (श्री बी. शंकरानंद) : (क) जी नहीं। दिल्ली प्रशासन को केवल इस बात की सूचना भेजी गई है कि इलेक्ट्रोपैथी चिकित्सा पद्धति को भारत सरकार द्वारा मान्यता प्रदान नहीं की गई है।

(ख) दिल्ली प्रशासन ने सूचित किया है कि उन्होंने सार्वजनिक नोटिस जारी किया जिसमें इलेक्ट्रोपैथी चिकित्सा पद्धति को मान्यता न देने के बारे में वास्तविक स्थिति स्पष्ट की गई है और आम जनता को यह चेतावनी दी गई कि संस्थानों द्वारा प्रदान की गई डिग्रियों/डिप्लोमों के धारक चिकित्सीय प्रेक्टिस करने के हकदार नहीं हैं और यदि वे इस पद्धति की प्रेक्टिस करते हैं तो यह इस देश के कानून और चिकित्सीय संहिता का उल्लंघन होगा।

दिल्ली उच्च न्यायालय ने इस नोटिस में कोई कमी नहीं पाई और इस नोटिस को चुनौती देने वाली याचिका को रद्द कर दिया।

Assessment on Health and Clinical care services

289. DR. BAPU KALDATE:
SHRIMATI KAMLA SINHA:

Wiil the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether of late, Government have made any assessment with regard to the Government financed Health and clinical care services reaching to rural and urban poor;

(b) if so, what are the details thereof stating the percentage of the rural and urban people benefited by the Health services-

(c) the deficiencies if any, identified in Health care and clinical servicies in reaching the maximum number of rural and urban poor; and

(d) the strategy, if any formulated by Government to give maximum benefits from these health care services to the nearly and poor rural and urban people?

THE MINISTER FOR HEALTH AND FAMILY WELFARE (SHRI B. SHANKARANAND): (a) and (b) Yes Sir. Surveys which inter-alia examine the utilisation of Health and Clinical care Services have been conducted by various institutions. Recent studies by National Sample Survey Organisation and the National-Council for Applied Economic Research indicate the following:

	NSS	MER
	Survey (1990)	Survey (1991)
1 Use of Govt. facilities by rural population	25.6%	37.9%
2 Use of Govt. facilities by Urban population	27.2%	39.1%

(b) By and large the deficiencies brought out by various reports relate to inadequate supplies of medicines and inadequated supplies of medicines and vacancies among staff.

(d) The provision of Health Care Services is the responsibility of State Governments. However, the Centre has apprised them of the findings of the sur veys and reviews carried out enable them to make the necessary interventions. In order to augment the efforts made the Centre has also provided assistance to control and eradicate specific diseases which affect the poor both in rural and urban areas.

Increase in the *rates* of various medical teste in AIIMS and FCI

290. DR. BAPU KALDATE:
SHRIMATI KAMLA SINHA:
SHRI RAMDAS AGARWAL:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have received any proposal for increase in the rates of various medical tests/operations [diag nosis etc. from two autonomous insti tutes in the country viz., AIIMS. New Delhi, PGI, Chandigarh and MCD Hos pitals in New Delhi;

(b) if so, whether Government have examined the proposed list of charges and reasons advanced therefor, indicat ing briefly the details/amount involved therein in each case;

(c) whether Government are also aware that some Doctors in the AIIMS are against such hike;

(d) if so, by when a decision is likely to be taken by the Central Government and whether they propose to subsidise the cost involved; and

(e) whether Government propose to ensure that poorer sections of our society are not hit and some discretionary powers should be given to the Heads of Institutes to give partial or full relaxation to poor patients/old people?

THE MINISTER. FOR HEALTH AND FAMILY WELFARE (SHRI B. SHAN-KARANAND): (a) Yes, Sir. Proposals have been received from the All India Institute of Medical Sciences, New Delhi and P.G.I. Chandigarh.

(b) to (e) The proposals are under examination?

AIDS cases in the country

291. SHRI MURLIDHAR CHANDRA-KANT BHANDARE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) the number of AIDS cases, Statewise;

(b) what is the rate of growth in these cases; and

(c) the preventive measures taken to onst the spread of this disease?

THE MINISTER FOR HEALTH AND FAMILY WELFARE (SHRI B. SHAN-